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PTO/SB/17 (12-04v2)

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FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
1,810.00

Complete if Known

Application Number	10/619,888
Filing Date	July 15, 2003
First Named Inventor	Paul J. Thompson
Examiner Name	Paul B. Prebilic
Art Unit	3738
Attorney Docket No.	23,369-153

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: **12-0449** Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues) **Fee (\$)** **Small Entity**
 Each independent claim over 3 (including Reissues) **Fee (\$)** **Small Entity**
 Multiple dependent claims **Fee (\$)** **Small Entity**

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =	x	=		Fee (\$) Small Entity

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$) Small Entity
- 3 or HP =	x	=		Fee (\$) Small Entity

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

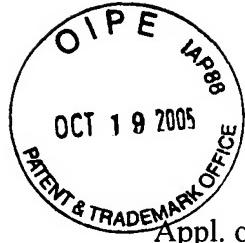
Other (e.g., late filing surcharge): **Filing Fee (RCE) (\$790.00)** and **Extension Fee (\$1,020.00)** **\$1,810.00**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 27,717	Telephone 952-896-1574
Name (Print/Type)	Frederick W. Niebuhr		Date October 19, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Patent Application

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. of: THOMPSON, Paul J. Art Group: 3738
Serial No.: 10/619,888 Examiner: Paul B. Prebilic
Filed: July 15, 2003 Atty. Docket: 23,369-153
For: Three-Dimensional Braided Covered Stent

TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed for filing are the following items:

1. Request for Continued Examination (RCE) under 37 C.F.R. 1.114;
2. Amendment Accompanying Request for Continued Examination (12 pages), consisting of cover page (1 page), listing of the claims (9 pages) and remarks (2 pages);
3. Request for Extension of Time (2 pages);
4. Fee Transmittal FY2005;
5. Check in the amount of \$790.00 in payment of the filing fee;
6. Check in the amount of \$1,020.00 in payment of the time extension fee; and
7. Return receipt postcard.

The Commissioner is authorized to charge any further fees necessitated by this correspondence, or credit any overpayment, to Deposit Account No. 12-0449.

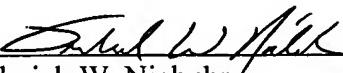
Prosecution in this application is closed, the previous (April 19, 2005) action being a final action.

Please direct any questions regarding this correspondence to the undersigned at the address and telephone number indicated below.

Respectfully submitted,

Boston Scientific Scimed, Inc.

Date: October 19, 2005

By: 
Frederick W. Niebuhr
Registration No. 27,717
LARKIN, HOFFMAN, DALY & LINDGREN, LTD.
1500 Wells Fargo Plaza
7900 Xerxes Avenue South
Bloomington, Minnesota 55431
(952) 896-1574

CERTIFICATE OF EXPRESS MAILING

Pursuant to 37 CFR 1.10, I hereby certify that this Transmittal and accompanying papers in U.S. Application Serial No. 10/619,888 and accompanying papers are being deposited with the U.S. Postal Service by Express Mail, Post Office to Addressee service, addressed to: Mail Stop RCE, Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on the date of deposit and under the mailing label number indicated below.

Date of Deposit: October 19, 2005


Geralyn M. Vita

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